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## BIB DATA SHEET

CONFIRMATION NO. 6092

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/659,295	09/11/2003	514	1649	242650US0CONT
<b>APPLICANTS</b> Wolf-Ruediger Schaebitz, Dossenheim, GERMANY; Armin Schneider, Heidelberg, GERMANY; Carola Krueger, Speyer, GERMANY; Clemens Sommer, Guenzburg, GERMANY; Stefan Schwab, Heidelberg, GERMANY; Rainer Kollmar, Heidelberg, GERMANY; Martin Maurer, Heidelberg, GERMANY; Daniela Weber, Mannheim, GERMANY; Nikolaus Gassler, Heidelberg, GERMANY;				
<b>** CONTINUING DATA *****</b> This application is a CON of 10/331,755 12/31/2002 ABN				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 11/18/2003				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and /CHRISTINA M BORGEEST/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWINGS</b> 27	<b>TOTAL CLAIMS</b> 104
<b>INDEPENDENT CLAIMS</b> 9				
<b>ADDRESS</b> OBLON, SPIVAK, MCCLELLAND MAIER & NEUSTADT, L.L.P. 1940 DUKE STREET ALEXANDRIA, VA 22314 UNITED STATES				
<b>TITLE</b> Methods of treating neurological conditions with hematopoietic growth factors				
<b>FILING FEE RECEIVED</b> 2946	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	